It's never the fear of bringing a new life into the world that frightens a woman; it is the fear of the pain she has to endure to do it. Most women will only be found discussing how bad her pains were when she was in labour, but then you have those who say, "I didn't feel a thing, I opted for analgesia."

Thus in today's age, we can help most women who have access to health care to make her labour less painful and just a wonderful memory of the birth of her child.

Pain relief is important because when a woman in labour starts hyperventilating (breathing excessively) during contractions, the subsequent hypoventilation (decreased breathing) causes a decreased oxygen supply to her baby. So to cause adequate oxygenation of the baby, a mother must be relaxed during her contraction. The solution is labour analgesia.

Pain relief can be achieved in various ways:

1. Non-medical Methods
   a. Lamaze - This includes physical and psychological buildup of the expectant mother. It includes various prenatal and breathing exercises in anticipation of labour. So go ahead and join a Lamaze class or do it on your own.
   b. Acupuncture - benefits some
   c. Hypnosis & Psychotherapy - It may produce sedation, amnesia and analgesia.
   d. Acupressure & Yoga -
   e. TENS - (Transcutaneous Electric Nerve Stimulation) - little is known about its benefits

2. Medical Methods
   a. Generalized or Systemic analgesia - these are less preferred to regional anaesthetic agents used nowadays. They are of various types:
      i. Tranquilizers
      ii. Calmose (Diazepam)
      iii. Phenargan
      iv. Pethidine
      v. Fortwin (Pentazocine)
      vi. Ketamine
      vii. Inhalation analgesia

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These must be taken with the full knowledge of your obstetrician.

b. Regional analgesia:
   i. Local anaesthesia for the perineal region especially during an episiotomy
   ii. Pudendal block - given through the vagina especially in cases of forceps or vacuum deliveries
   iii. Paracervical anaesthesia for pain during cervical dilatation
   iv. Epidural anaesthesia - it is widely used today. It is given into the spine. It takes away the
sense of pain while leaving the muscle power intact, thereby enabling the patient to push during
contractions. The occasional complications are prolonged labour and occasional backache.

So decide what its going to be for you and talk to your obstetrician about this during your
antenatal visits thus leaving no room for last minute tensions and rushes.